

COPY

SITE CLOSURE REPORT
WORTH INDUSTRIES
3416 SANDY RIDGE ROAD
COLFAX, NORTH CAROLINA

AUGUST 13, 1995

LEGACY ENVIRONMENTAL SERVICES, INC.





LEGACY ENVIRONMENTAL SERVICES, INC.

P.O. Box 4560, Greensboro, NC 27404-4560, Phone (910) 316-0452, FAX (910) 299-1961

August 13, 1995

Mr. Charles Whisenant
Shamrock Corporation
PO Box 16247
Greensboro, North Carolina 27416

Reference: Site Closure Report
Worth Industries
3416 Sandy Ridge Road
Colfax, North Carolina

Dear Mr. Whisenant,

On October 5, 1993, a soil assessment report was issued and received by Guilford County Emergency Services. In accordance with Guilford County's November 1, 1993 letter a monitor well was installed and the groundwater tested for isopropyl acetate. According to our records the water quality data was faxed to Guilford County on December 31, 1993.

Legacy Environmental Services, Inc. was contracted by Shamrock Corporation to report site closure activities. The following measures have been performed at this facility:

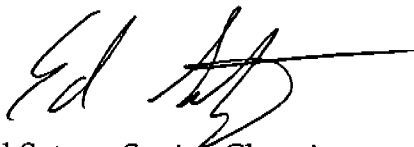
- o The USTs located at this facility were removed from the site on 1/20/93. In order to mitigate fire and safety hazards and to prevent further release, all regulated substances were removed from the UST. Figure 1 illustrates the location of the project site. A copy of the GW/UST-2 Site Investigation Form is included as Attachment A. A UST closure report was previously submitted.
- o On January 17, 1994, an initial groundwater testing report was prepared by Legacy and submitted to Arnold Equipment. Testing of the groundwater via a monitor well did not reveal any detectable levels of isopropyl acetate; a copy of this report is in Attachment B.
- o On July 5, 1995, the DEM issued a certificate of approval (Attachment C) for disposal of approximately 40 cubic yards of petroleum distillate contaminated soil resulting from the permanent closure of the USTs at this site.
- o This report was conducted under the supervision of a Professional Engineer; this certification is included as Attachment D. We recommend forwarding this report to the Guilford County Health Department at the following address for a final determination:

Ms. Kelly Gage
Guilford County Department of Public Health
301 N. Eugene Street
Greensboro, NC 27401

This report has been prepared for the exclusive use of Shamrock Corporation for the specific application to the referenced site located in Colfax, North Carolina. The evaluation was conducted based on the scope of work and level of effort desired by the client and with resources adequate only for the scope of work. Our findings have been developed in accordance with generally accepted standards for site closures in the State of North Carolina, available information and our professional judgement. No other warranty is expressed or implied. The data presented in this report are indicative of conditions at the precise locations sampled and at the time the sample was collected. Additionally, the data obtained from the samples would be interpreted as meaningful with respect to the parameters in the laboratory reports. No additional information can be logically inferred from this data.

Mr. Whisenant, please contact our office if you have any questions concerning this report.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ed Setzer', with a long horizontal flourish extending to the right.

Ed Setzer, Senior Chemist
Legacy Environmental Services, Inc.

FIGURES

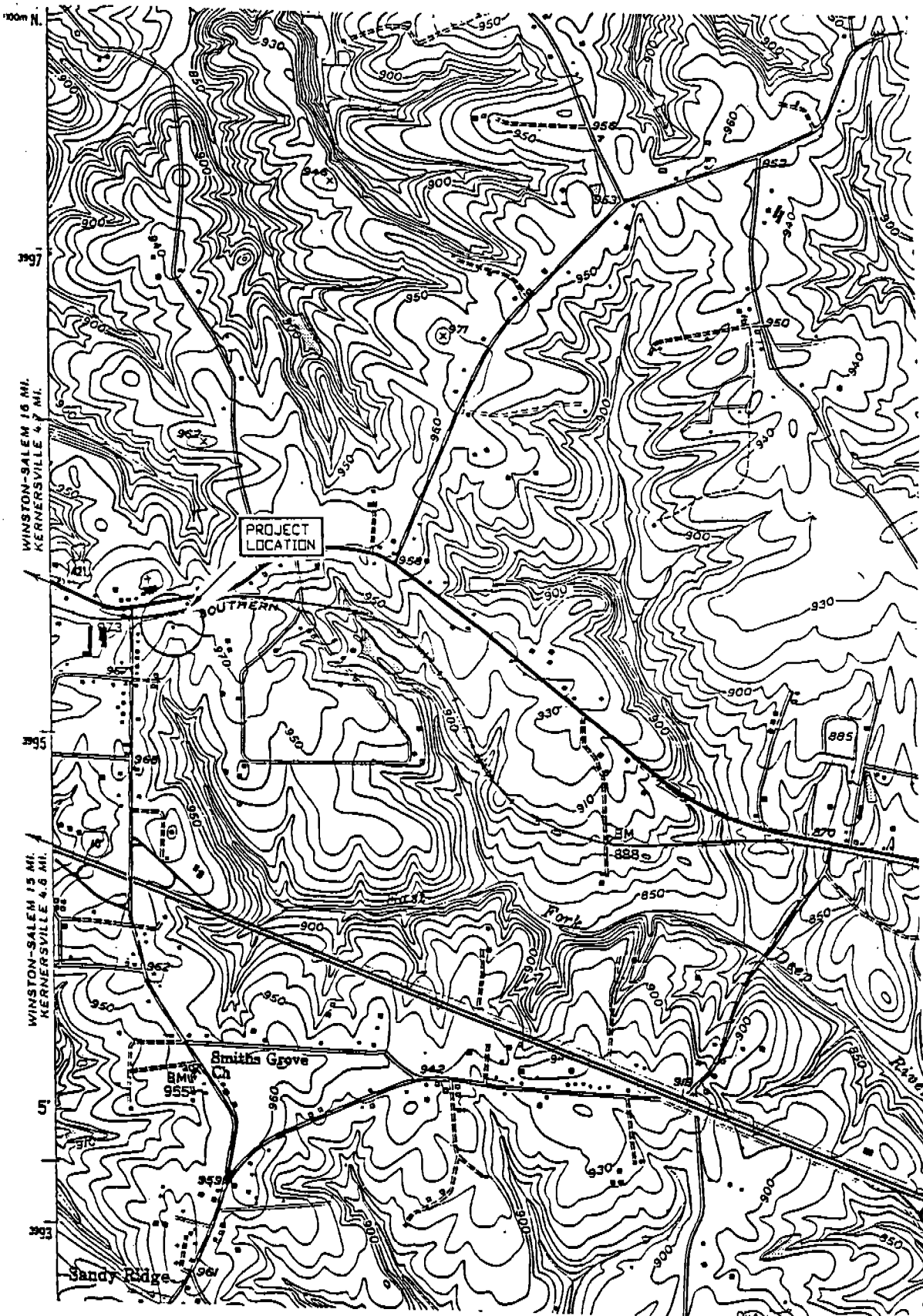



FIGURE 1

SCALE: 1"=2000' DATE: 7/18/93 DRAWN BY: SGF DWG. NO.: L93-366A	TITLE: PROJECT LOCATION	PROJECT: SOIL ASSESSMENT WORTH INDUSTRIES COLFAX, NC	CLIENT: ARNOLD EQUIPMENT	 LEGACY ENVIRONMENTAL SERVICES, INC. GREENSBORO, NORTH CAROLINA
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ATTACHMENT A

UST-2)

Site Investigation Report For Permanent Closure or Change-in-Service of U.S.T.

OR
TANKS
IN
NC

Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location.
[SEE MAP ON REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL
OFFICE ADDRESS].

State Use Only

I.D. Number _____

Date Received _____

INSTRUCTIONS

Complete and return within (30) days following completion of site investigation.

I. Ownership of Tank(s)

II. Location of Tank(s)

Shamrock Corporation

Owner Name (Corporation, Individual, Public Agency, or Other Entity)

P.O. Box 16247

Street Address
Greensboro, NC 27405County
XXXXXX GuilfordCity
919/574-4200 State Zip Code

Area Code Telephone Number

Worth Industries

Facility Name or Company

Facility ID # (if available)

3416 Sandy Ridge Road

Street Address or State Road

XXXXXXX Guilford

COLFAX NC 27235

County

City

Zip Code

N/A

Area Code

Telephone Number

III. Contact Person

Charles Whisonant

Dir. of Manufacturing

919/574-4200

Name

Job Title

Closure Contractor Arnold Equipment Company, Inc. P.O. Box 18207 GSO, NC 27419 Telephone No. (Area Code) 919/299-5220

(Name)

(Address)

Lab Research & Analytical Labs Kernersville, NC

Telephone No. (Area Code)

919/996-2841

(Name)

(Address)

Telephone No. (Area Code)

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

Tank No.	Size in Gallons	Tank Dimensions	Last Contents	Water in Excavation		Free Product		Noticeable Odor or Visible Soil Contamination	
				Yes	No	Yes	No	Yes	No
1	6K	8'0"x16'0"	Iso.P. Acetate		X		X	X	
2	4K	4'0"x24'0"	Ethyl Acetate		X		X		X
3	2K	5'0"x12'2"	Ethyl Acetate		X		X		X
4	2K	5'0"x12'2"	Ethyl Alcohol		X		X		X
5	2K	5'0"x12'2"	DiOctyl PhTh.		X		X		X
6	4K	4'0"x24'0"	Gasoline		X		X		X

See reverse side of pink copy
(owner's copy) for additional
information required by
N.C. - DEM in the
written report and sketch.

COPY

VII. Check List

Check the activities completed.

- ☐ Contact local fire marshal
- ☒ Notify DEM Regional Office before abandonment REMOVAL.
- ☒ Drain & flush piping into tank.
- ☒ Remove all product and residuals from tank
- ☒ Excavate down to tank.
- ☒ Clean and inspect tank.
- ☒ Remove drop line, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures.
- ☒ Cap or plug all lines except the vent and fill lines.
- ☒ Purge tank of all product & flammable vapors.
- ☒ Cut one or more large holes in the tanks. BY SAFEWAY TANK DISP.
- ☒ Backfill the area. 01/20/93
- Date Tank(s) Permanently closed: _____
- Date of Change-in-Service: _____

I certify this is a true copy

- ☐ ABANDONMENT IN PLACE
- ☐ Fill tank until material overflows tank opening;
- ☐ Plug or cap all openings;
- ☐ Disconnect and cap or remove vent line
- ☐ Solid inert material used - specify: _____

REMOVAL

- ☒ Create vent hole
- ☒ Label tank
- ☒ Dispose of tank in approved manner
- Final tank destination: Safeway Tank Disposal
- Colfax, NC

VIII. Certification (Read and Sign)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Print name and official title of owner or owner's authorized representative

Mr. Charles Whisonant - Dir. of Mfg.

Signature

Date Signed

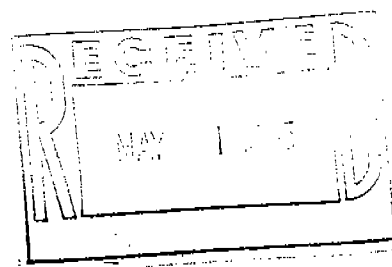
2/3/93

ATTACHMENT B

INITIAL GROUNDWATER TESTING
SUMMARY REPORT

WORTH INDUSTRIES
COLFAX, NORTH CAROLINA

JANUARY 17, 1994





LEGACY ENVIRONMENTAL SERVICES, INC.

P.O. Box 4560, Greensboro, NC 27404-4560, Phone (910) 316-0452, FAX (910) 299-1961

January 17, 1994

Mr. Roger Brewster
Arnold Equipment Company, Inc.
PO Box 18207
Greensboro, NC 27419

Reference: Initial Groundwater Testing Summary Report
Worth Industries
Colfax, North Carolina

Dear Mr. Brewster,

Please find enclosed a report summarizing the initial groundwater testing for the former underground storage tank locations at the above referenced facility. The groundwater testing consisted of the installation of one permanent monitoring well located in the vicinity of the former underground storage tanks. On December 28, 1994 field personnel from Legacy mobilized to the site to perform the installation of the monitoring well and sample the groundwater for isopropyl acetate analysis. The results of these activities are summarized herein.

If you have any questions please contact our office.

Sincerely,

Ed Setzer
Senior Chemist

c. LES job file P-228

TABLE OF CONTENTS

	Page
1.1 Introduction	1
1.2 Scope of Services	1
1.3 Conclusions and Recommendations	1

LIST OF FIGURES

Figure 1: Monitoring Well Location

ATTACHMENTS

Attachment A:	Well Construction Record
Attachment B:	Analytical Report

**INITIAL GROUNDWATER TESTING SUMMARY REPORT
WORTH INDUSTRIES
COLFAX, NORTH CAROLINA**

1.1 Introduction

Worth Industries operated six underground storage tanks (USTs) at the site in Colfax, NC. A decision was made by Worth Industries to remove these underground storage tanks in order to comply with the requirements of EPA 40 CFR Part 280. Arnold Equipment Company, Inc. was contracted to conduct this closure project and ensure compliance with all Federal, State and Local regulations. In order to assess the condition of the site and to estimate the extent of contamination, an environmental assessment of the soils surrounding the USTs was performed. As a result of the mild soil contamination discovered during the assessment, Guilford County required the installation of a monitoring well system to investigate possible groundwater contamination.

1.2 Scope of Services

On January 17, 1994 field personnel from Legacy mobilized to the site to install a monitor well system in the area surrounding the USTs. The location of this well (MW-1) is detailed in Figure 1. A water sample was collected and tested for isopropyl acetate as required by Guilford County's November 1, 1993 letter. The well was purged and the groundwater sample was collected using DEM's March 1993 guidelines. The well construction record is included as Attachment A; the analytical results are included as Attachment B.

1.3 Conclusions and Recommendations

The analytical testing of the groundwater did not reveal any detectable levels of isopropyl acetate, therefore, the mild soil contamination identified during the UST closure does not appear to be a significant secondary source which could potentially threaten groundwater quality.

We recommend forwarding a copy of this summary report to Guilford County Emergency Services.

VI. DESCRIPTION OF UNDERGROUND STORAGE TANKS (Complete for each tank at this location.)

Tank Identification No. (e.g., ABC-123), or Arbitrarily Assigned Sequential Number (e.g., 1,2,3...)	Tank No. 1	Tank No. 2	Tank No. 3	Tank No. 4	Tank No. 5
Status of Tank (Mark all that apply <input checked="" type="checkbox"/>)					
Currently in Use	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Temporarily Out of Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permanently Out of Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brought into Use after 5/8/86	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Estimated Age (Years)	20	20	20	20	20
Estimated Total Capacity (Gallons)	6,000	4,000	2,000	2,000	2,000
Material of Construction (Mark one <input checked="" type="checkbox"/>)					
Steel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Concrete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fiberglass Reinforced Plastic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
Internal Protection (Mark all that apply <input checked="" type="checkbox"/>)					
Cathodic Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interior Lining (e.g., epoxy resins)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other, Please Specify					
External Protection (Mark all that apply <input checked="" type="checkbox"/>)					
Cathodic Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Painted (e.g., asphaltic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fiberglass Reinforced Plastic Coated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
Piping (Mark all that apply <input checked="" type="checkbox"/>)					
Bare Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Galvanized Steel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Fiberglass Reinforced Plastic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cathodically Protected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
3. Substance Currently or Last Stored in Greatest Quantity by Volume (Mark all that apply <input checked="" type="checkbox"/>)					
a. Empty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Petroleum					
Diesel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gasoline (including alcohol blends)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Used Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify	BLEND #1284	BLEND #1290			
c. Hazardous Substance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Please Indicate Name of Principal CERCLA Substance	ISO. P. ACE.	E. ACE.	ETHYL ACE.	E ALCOHOL	DOP
OR Chemical Abstract Service (CAS) No.	108-21-4	144-78-6	144-78-6	64-17-5	117-81-7
Mark box <input checked="" type="checkbox"/> if tank stores a mixture of substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Additional Information (for tanks permanently taken out of service)					
a. Estimated date last used (mo/yr)	/	/	/	/	/
b. Estimated quantity of substance remaining (gal.)					
c. Mark box <input type="checkbox"/> if tank was filled with inert material (e.g., sand, concrete)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. DESCRIPTION OF UNDERGROUND STORAGE TANKS (Complete for each tank at this location):

Tank Identification No. (e.g., ABC-123), or Arbitrarily Assigned Sequential Number (e.g., 1,2,3...)	Tank No. 6	Tank No.	Tank No.	Tank No.	Tank No.
Status of Tank (Mark all that apply <input checked="" type="checkbox"/>)					
Currently in Use	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temporarily Out of Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permanently Out of Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brought into Use after 5/8/86	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Estimated Age (Years)	15				
Estimated Total Capacity (Gallons)	(2000) 4,000 RSL 2-19-93				
Material of Construction (Mark one <input checked="" type="checkbox"/>)					
Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concrete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fiberglass Reinforced Plastic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
Internal Protection (Mark all that apply <input checked="" type="checkbox"/>)					
Cathodic Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interior Lining (e.g., epoxy resins)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
External Protection (Mark all that apply <input checked="" type="checkbox"/>)					
Cathodic Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Painted (e.g., asphaltic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fiberglass Reinforced Plastic Coated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
Piping (Mark all that apply <input checked="" type="checkbox"/>)					
Bare Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Galvanized Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fiberglass Reinforced Plastic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cathodically Protected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
Substance Currently or Last Stored in Greatest Quantity by Volume (Mark all that apply <input checked="" type="checkbox"/>)					
a. Empty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Petroleum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diesel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gasoline (including alcohol blends)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Used Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Please Specify					
c. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please Indicate Name of Principal CERCLA Substance					
OR					
Chemical Abstract Service (CAS) No.					
Mark box <input checked="" type="checkbox"/> if tank stores a mixture of substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Information (for tanks permanently taken out of service)					
a. Estimated date last used (mo/yr)	/	/	/	/	/
b. Estimated quantity of substance remaining (gal.)					
c. Mark box <input type="checkbox"/> if tank was filled with inert material (e.g., sand, concrete)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>